VISAYAS STATE UNIVERSITY PERSONAL DATA SHEET

PLEASE PASTE an ID picture taken within the last 6 months (2" x 2" or Passport Size

For Casual (REQUIRED)												
Print legibly. Mark appropriate boxes												
1. SURNAME E S C A L A												
FIRST NAME	L E O N I F E R						<u>, , , , , , , , , , , , , , , , , , , </u>					
MIDDLE NAME	S I M P R O N			1 1 1 1	2. NAME EXTENSION (e.g. Jr.,			, Sr.)		N/A		
3. DATE OF BIRTH (mm/dd/yyyy) 05/02/1989				11. PRESENT ADDF								
4. PLACE OF BIRTH	Brgy. Jaena, Baybay Ci					Brgy. Jae	na, Bayba	ay City, Leyte				
5. SEX	■ Male ☐ Fema											
6. CIVIL STATUS	6. CIVIL STATUS ☐ Single ☐ Widowed ☐ Married ☐ Separated			12. ZIP CODE		6521-A						
	ers, specify				09513962413							
			_	14. PHILHEALTH N	0.							
7. CITIZENSHIP			65kg									
8. HEIGHT (m) 17. SPOUSE'S SURNAME	1.54	10. BLOOD TYPE	A+	16. PAG-IBIG ID NO								
	ESCALA					NAME OF CHILD (Write full name and list all)				DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME	RONALYN			ATARAH FAITH SILLACAY ESCALA				ALA	09/08/2018			
MIDDLE NAME 19. HIGHEST EDUCATIONAL	SILLACAY	[] Elementony (Crede		/ Craduated								
		[] Elementary (Grade [] High School (1st, 2r										
(Please check and unde	nine ine specific)	[/] College (<u>1st</u> , 2nd, 3 Degree: _	,	Graduated)								
20. CAREER SERVICE ELIGI	BILITY	□ Professional		Sub-Profession	 ional □ Others, Specify:							
21. WORK EXP INCLUSIVE DATE	POSITI (Write	ON TITL in full)	E	DEPARTMENT / AGENCY / OFFICE COMPANY /PROJECT (Write in full)			SALARY (Daily or Monthly)	APPC (Per	ATUS OF DINTMENT rm/Temp/ o Order)	GOV'T SERVICE (Yes / No)		
From 2022	To Present	WELDER/F	ADDIC	ATOD	Eivo	Shepherd			CONT	DACTUAL	NO	
2016	2022	WELDER/F				Root Crops				RACTUAL RACTUAL	NO YES	
2011 2006	2015	WELDE	R/DRIV _DER	ER	C	`ntahatn				RACTUAL	YES	
2006	2008	WE	Proficionav	Metsa Foundation Davao City y (Please check)			CONT	RACTUAL	YES			
SPECIAL SKILLS (i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)		Highly Skilled		Average		Fair			REMARKS			
Driving Flexible				/	'							
Hardworking			,	1								
Electrical wiring				I	1							
23. RELEVANT TRAININGS S		INCLUSIVE DATE	S OF AT			COND			UCTED/ SPONSORED BY			
ATTEN (Write i		From		То	NUMBER OF HOURS		CONDO			(Write in full)		
BUILDING WIRING INSTALLATION NCII		2007	2008					DAVAO CITY				
SHIELDED METAL ARC WELDER II		2009		2010				DAVAO CITY				
							 					
							-					
I hereby declare that this Personal Data Sheet has been accomplished by me, and is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines.												
24. COMMUNITY TAX CERTIFICATE NO. 18943276 ISSUED AT: MUNICIPALITY OF BAYBAY ISSUED ON (mm/dd/yy): 03/24/2023												
SIGNATURE:	K	DATE ACCOMPLISHED: (m	m/dd/w	vv) 07/20/2023								

29. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE/ TESDA/NCC RATING DATE OF EXAMINATION / CONFERMENT PLACE OF EXAMINATION / CONFERMENT NUMBER DAT REL	able) TE OF LEASE
SPECIAL LAWS/ CES/ CSEE/ TESDA/NCC TATING LAWS TEACL OF LAWS CONTENTION C	TE OF LEASE
(Continue on separate sheet if necessary)	
(Continue on separate sheet if necessary) CS FORM 212 (Revised 2005), Pag	ge 2 of 4

VI. SPECIAL SKILLS										
SPECIAL SKILLS (i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic,		Proficiency								
driving, et. al.)	Highly Skilled	Average	Fair							
(Continu	e on separate sheet if	necessary)								
VII. TRAINING PROGRAMS (Start from the most recent training.)										
32. TITLE OF SEMINAR/CONFERENCE/WORKSHOP/SHORT COURSES (Write	INCLUSIVE DATES (mm/do		NUMBER OF HOURS	CONDUCTED/ SPONSORED BY						
in full)	From	To		(Write in full)						
	/ /	1 1								
	1 1	1 1								
	(Continue on separate sheet if necessary)									
 36. Are you related by consanguinity or affinity to any of the following: a. Within the third degree with the appointing authority, recommending authority, chief of office/bureau/department or 	□ NO									
person who has immediate supervision over you in the Office,										
Bureau or Department where you will be appointed?										
(Continu	e on separate sheet if	necessary)		00 FORM 040 (Participants) Proc 0 44						
				CS FORM 212 (Revised 2005), Page 3 of 4						

VI.	SPECIAL SKILLS									
22.	SPECIAL SKILLS (i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)			Proficiency (Please check)						
22.				Highly Sk	illed	Average	Fair	REMARKS		
VII.	TRAINING PROGRAMS (Start from the mo	ost recent training.)								
VII. TRAINING TROOKAMS (Start from the most recent daming.)				LUSIVE DA	TES OF					
23. TITLE OF SEMINAR/CONFERENCE/WORKSHOP/SHORT COURSES			ATTENDANCE (mm/dd/yyyy)			NUMBER OF	CONDUCTED/ SPON			
	(Write in full)		From ,kv y			HOURS	(Write in ful)		
			110	///II	,RV y					
			1	1	1 1					
			-	1	1 1					
24.	Are you related by consanguinity or		/	1	1 1					
	affinity to any of the following:									
a.	Within the third degree with the appointing	ng authority.								
	recommending authority, chief of office/b	oureau/ department or	YES NO							
	person who has immediate supervision of Office, Department/Project where you will	If YES, gi	ve details	S:						
	Cinco,2 opai.uno.un rejoot innois you inn 20 appenied.									
25.	REFERENCES (Person not related by consanguin	ity or affinity to applicant / a	appointee)							
	NAME	ADDRESS	TEL. NO.				\neg			
							The state of the s	- 1		
								- 1		
							(D)	- 1		
26.	I declare under oath that this Personal D	ata Sheet has been a	ccomplis	shed by	me, and	i I	(60)	- 1		
	is a true, correct and complete statemen	t pursuant to the provi						- 1		
	rules and regulations of the Republic of t									
	I also authorize the agency head / authorize	rized representative to	verify /	validate	the			111		
contents stated herein. I trust that this information shall remain										
COMMUNITY TAX CERTIFICATE NO.										
ICOUPLE AT				(1 - 1 -)						
	ISSUED AT	SIGNATURE (oign inside i	tne box)						
1 1										
ISSUED ON (mm/dd/yyyy) DATE ACCO				COMPLISHED			RIGHT THUMBMARK (REQUIRED)			
H							(INCOUNCE)	Page 2 of		